									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD														
Effective October 1, 2000										09742882				
CLAIMS AS FILED - PART ! (Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAIMS									RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	Basic Fee	710.00		
TOTAL CHARGEABLE CLAIMS				7 minus 20=		•			X\$ 9=		OR	X\$18=	7	
INDEPENDENT CLAIMS				3 minus 3 =					X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PI				RESENT				 	+135=				/-	
* If the difference in column 1 is less than zero, enter "0" in column 2											OR	+270=	7	
IOIALOR IOIAL E													710:-	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								_	SMALL I	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID		BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE /	ADDI- TIONAL FEE	
	Total	$\cdot \parallel$		Minus	2	0	3	1	X\$ 9=		OR	X\$18=		
	Independent			Minus		<u>}</u>	-/	lſ	X40=	1	OR	X8/0=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135≃			+270=		
_								L	TOTAL		OR	TOTAL		
	B								DDIT. FEE		OR	ADDIT, FEE		
AMENDMENT B	CLAIMS				(Colui	EST	(Column 3)	1 6		ADDI-	1 1		456)	
		REMAINING AFTER AMENDMENT		PRE		BER DUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		FATE	ADDI- TIONAL FEE	
	Total	. 4		Minus	Ž	्र	= 1		X\$ 9=	ree	OR	X\$*8=	- 125	
	Independent			Minus	•••	3	=]	X40=		OR	X80		
•	FIRST PRESE	NTATION	OF MU	JLTIPLE DEI	PENDENT	CLAIM		ነ	105		- 1	1000		
								L	+135=		OR	+270= TOTAL		
									DOIT. FEE		OR	ADDIT. FEE		
_	KW CV-M105200	(Colur		110/14/27 27 11	(Colu		(Column 3)	, , _						
AMENDMENT C		REMAI AFT	NING ER		NUM PREVI	BEA	PRESENT EXTRA	\prod	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
	Total	AMEND	maz N I	Minus	PAID	run .		1	X\$ 9=	FEE		X\$18=	FEE	
	Independent	ļ. —		Minus			-	1 F			OR	[
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1 -	X40≖		OR	X80≖		
											OR	+270=]	
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE											OR	TOTAL ADDIT, FEE		
•••	If the "Highest Num The "Highest Num	mber Prev	iously Pa	ed For IN TH	S SPACE	is less the	an 3, enter "3."	Α.		ropriate bo	'			
				. ,				224				•]	